Wyre Council Civic Centre, Breck Road Poulton-le-Fylde, Lancashire FY6 7PU Tel: (01253) 891000 Fax: (01253) 887252 planning@wyre.gov.uk



www.wyre.gov.uk/planning

Application for removal or variation of a condition following grant of planning permission. Town and Country Planning Act 1990. Planning (Listed Buildings and Conservation Areas) Act 1990

Publication of applications on planning authority websites.

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

1. Site Address	
Number	18
Suffix	
Property name	Springfield House
Address line 1	Wheel Lane
Address line 2	
Address line 3	
Town/city	Pilling
Postcode	PR3 6HL
Description of site location must be completed if postcode is not known:	
Easting (x)	339575
Northing (y)	448890
Description	

2. Applicant Details		
Title		
First name	Virginia	
Surname	Perks	
Company name	Care 4 Children	
Address line 1	1 Stuart Road	
Address line 2		
Address line 3	Bredbury	
Town/city	Stockport	

2. Applicant Details	
Country	
Postcode	FY2 0PJ

Are you an agent acting on behalf of the applicant?

Primary number	
Secondary number	
-	
Fax number	
Email address	
Email address	

🖲 Yes 🛛 🔾 No

3. Agent Details

Title	
First name	Jatinder
Surname	Gill
Company name	Rose Consulting
Address line 1	c/o Agent
Address line 2	16 Rhodesia Avenue
Address line 3	
Town/city	Halifax
Country	United Kingdom
Postcode	HX30PB
Primary number	
Secondary number	
Fax number	
Email	

4. Description of the Proposal

Please provide a description of the approved development as shown on the decision letter

Change of use from a hotel (C1) to a residential institution wellness facility (C2)	
Reference number	
18/00363/FULMAJ	
Date of decision (date must be pre- application submission)	28/06/2018
Please state the cond	ition number(s) to which this application relates
Condition number(s)	
3	

4. Description of the Proposal

Has the development already started?

5. Condition(s) - Removal/Variation

Please state why you wish the condition(s) to be removed or changed

See Planning Statement- to allow the resident children to receive education within the building.

If you wish the existing condition to be changed, please state how you wish the condition to be varied

'The premises shall be used for the therapeutic treatment and education of children as described in this application in the planning statement (20/09/2021) and for no other purpose (including any other purpose in Class C2 or F1 of the Schedule to the Town and Country Planning (Use Classes) Order 1987, (or in any provision equivalent to that Class in any statutory instrument revoking and re-enacting that Order with or without modification).'

6. Site Visit

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?

- The agent
- The applicant
- Other person

7. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

8. Ownership Certificates and Agricultural Land Declaration

CERTIFICATE OF OWNERSHIP - CERTIFICATE A - Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14

I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/the applicant was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding**

* 'owner' is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** 'agricultural holding' has the meaning given by reference to the definition of 'agricultural tenant' in section 65(8) of the Act.

NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding.

Person role	
The applicant	
The agent	
Title	
First name	Adrian
Surname	Rose
Declaration date (DD/MM/YYYY)	10/09/2021
Declaration made	

9. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

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🔾 Yes 🛛 🖲 No

🔾 Yes 🛛 💿 No